Money Follows the Person Stakeholder Committee Meeting Agenda

January 8, 2008

- Welcome and Introductions
 - Role of the Stakeholder Committee (Brief Review)
 - Agenda Item Review
- Goals and Benchmarks Update
- Break Time-10 minutes
- Housing Update
- Nursing Facility Transition Policy and Procedure Update
- Break Time-10 minutes
- Quality Update
- ICF/MR Transitions Update
- Website Development Update
- Work Group Meeting Dates
- Next Committee Meeting Date

Money Follows the Person Stakeholder Committee Meeting Minutes

January 8, 2008

Pioneer Room, Judicial Wing, State Capitol, Bismarck, ND

Documents Provided: Meeting PowerPoint Presentation

Attendees:

Advocacy Groups/Consumers:

Helen Funk, ND DHS Aging Services, Ombudsman Linda Wurtz, AARP Bruce Murry, Protection and Advocacy Judie Lee, IPAT Peggy Shireley, IPAT Jim Moench, ND Disabilities Advocates Leslie Stastny, ND Association for the Disabilities DeEtt Ruggles, Bowman Bob Puyear, Bismarck Dianne Sheppard, The ARC of ND

Housing:

Tom Alexander, ND Center for Persons with Disabilities, MIG Wayne Glaser, ND Dept of Commerce, Division of community Services

Care Providers:

Shelly Peterson, ND Long Term Care Association
Sharon Klein, Long Term Care Social Workers of North Dakota
Tammy Theurer, ND Association for Home Care
Doug Wegh, Hettinger County Social Services
Diane Mortinson, Adult Services Community
Jodie Fetsch, Custer Public Health District

Centers for Independent Living:

Royce Schultze, Dakota Center for Independent Living Steve Repnow, Independence Inc Randy Sorenson, Options Resource Center for Independent Living LaRae Gustafson, Options Resource Center for Independent Living Sue Ogurek, Independence Inc

Department of Human Services

Cherl Wescott, Vocational Rehabilitation
Lynne Jacobson, Aging Services
Nancy McKenzie, DHS Human Services
Vickie Peterson, Developmental Disabilities
Sandy Arends, Regional Aging Services Coordinator
Theresa Snyder, DHS Tribal Liasion

Sue Foerster, Developmental Center Tess Frohlich, HCBS, Medical Services Robin Hendrickson, Developmental Disabilities

Introductions:

Jake Reuter, MFP Grant Program Manager, Medical Services welcomed committee members and each member introduced themselves. The agenda was reviewed with no changes suggested.

The four primary MFP Rebalancing Grant Objectives with respect to institutional and home and community-based long-term care services under State Medicaid programs were reviewed including: 1)REBALANCING, 2)MONEY FOLLOWS THE PERSON, 3)CONTINUITY OF SERVICE, and 4)QUALITY ASSURANCE AND QUALITY IMPROVEMENT

Workgroup Reports

Goals and Benchmarks Workgroup

The Minimum Data Set (MDS) Information discussed was reviewed to include the following:

- Data Probe to Identify Persons with a Preference for Community Living
- Estimate of Potential MFP Participants
- Preference for Community Living-260 (Statewide)
- 57 persons were 64 or younger
- Approximately 25 with Alzheimer's Disease
- 101 with impaired decision making

It was found that most individuals identified in the probe did not meet the previously established Grant ADL eligibility.

The Workgroups recommendations to address this concern were outlined for the Stakeholder Committee to include the following:

• The support system availability in the community - not arbitrary criteria identified in the MDS is better measure for transition decisions

- If the right support systems could be developed persons with significant needs could transition successfully.
- The right supportive environment will be the critical factor when transitioning.
- Anyone that indicates the preference to return to the community could be referred for transition.
- The Transitional Coordinator to meet with the NF Social Worker to discuss the viability of transition with the Consumer
- Review available services in the area with the HCBS Case Manager

The overarching intent is to develop a system or process that meets the needs of all individuals in need of transitioning not just a system to serve MFP eligible individuals

The Committee also reinforced the Gaps or barriers of:

- Medically needy level of \$500 per month.
- QSP travel time requirements in rural areas of the state
 - It was also found that it would be very important to track the travel issue so that it can be communicated to the legislature. Without data it is very hard to convince the legislature of the need for additional funding.
- Support services when someone is ill, back from surgery, dressing change etc (increase
 in care need) is an issue that has not been addressed-Short term stay in Nursing home
 (2-3 days) was one option that could be pursued to address this need

Benchmark four was found to be redundant by the workgroup as the MFP grant requires the development of a stakeholder committee and indicated that an alternative benchmark may be more beneficial.

The Stakeholder Committee decided to leave the benchmark as it is written at this time and review latter in the grant. This interactive nature of the differing groups represented by the MFP group is not replicated at this time and fills an important role in planning and program development.

Benchmark Five was reviewed with the workgroups suggested changes outlined below:

The workgroup recommended that this be changed to read as follows:

- ND will create a crisis intervention/response system/process by 6/30/2008 to support:
 - Individuals who have transitioned from an institution to the community
 - Individuals currently in the community who might otherwise require institutional services but for the availability of this service. (2010) Target date

These recommendations created a review of the original language of the benchmark submitted in the grant application. Discussion resulted in a request that the workgroup review the benchmark and make clarify the service in light of the "medical model" framework that it was structured. It was also noted that this process will likely be handled on a case by case basis with the consumer and care providers involved.

Housing Workgroup

The strategies developed were reviewed for the Committee as follows:

- Develop local preferences for persons transitioning Communicate the goals of MFP to the each housing program and address the issue of establishing a local MFP priority.
- Increase tax incentives for project based Housing Development
- Develop a comprehensive list of project based housing available in ND
- Increase the Project based housing funded by Rural Development
- The primary provider of housing will be either section 8 project based housing or voucher based assistance.
- Formulate a planning partnership with the MIG Housing Task Force, Community Action Programs, and Local Housing Authorities
- Utilize Section 8 Home ownership program assistance as available
- Promote Construction Projects that all allow "Aging in Place".
- Assisted living was also noted as a housing option that has been identified. Tax credits have been of question as it has been difficult to separate the housing and services components. Services must be optional.
- The need to be flexible in determining what is going to work was emphasized as strategies that may work in the larger cities may not work in the more rural areas of the state.

- The need to develop more incentives for builders is one key to successful construction of projects that are inclusive in nature and will serve individuals that are elderly or with a disability.
- It was noted that a "definition of housing" has not yet been developed

The MFP Grant Manager will prepare the housing related operational protocol for review by the workgroup. The group will meet in early March with the MIG Housing taskforce and begin planning for implementation of the proposed housing strategies

Nursing Facility Transitions Workgroup

The work completed by the workgroup on 1-7-08 and 1-8-08 was reviewed with the Committee related to the areas of:

- Transition Process
- Eligibility
- Referral
- Assessment
- Transition/Independent Living Plan
- Role Matrix
- Supplemental Services Decision Process
- Referrals

The recommendation that all Individuals with a noted MDS Section Q preference to return to the community will be referred to the Transitional Coordinator/Nursing Facility Social Worker for discussion with the Individual was discussed an approved.

- Referral document that will be used was discussed
- The assessment tool to be used was discussed including its Compatibility with Home and Community Based Services Assessment completed by HCBS Case Managers. Concern was identified about the tool not being universally useable as the result of it being part of the SAMS software used by ND. This is an issue that will need additional discussion
- Discharge/Independent Living Plan Development was reviewed. This plan development will occur as part of an expanded Nursing Facility Discharge Planning process involving

the Transitional Coordinator, HCBS Case Manger, family members, Nursing Facility care plan team members, and the nursing facility resident/consumer

- Individuals with a Developmental Disability Living in a nursing facility may also need
 assistance with transitioning to an alternative setting. It was suggested that this would
 best be referred to their DD Case Manager or to the Human Services Center for
 involvement with DD Case Management Services.
- Supplemental Services allowance limits were discussed with the Minnesota process reviewed for the Committee. The need to be flexible to assure needed funding was expressed along with the need for some guidelines related to spending limits.
 Additional work will need to be completed on this question

Quality Workgroup

The first Quality Workgroup meeting was held on 12/17/2007 and included representative from LTC, DD, HCBS, P& A. The group reviewed the current quality assurance activities/processes in place at this time. The Medicaid waiver requirements for HCBS were briefly discussed as were the newly submitted DD waiver assurances.

The plan to review the proposed operational protocol and address 24-hour back-up, incident management, and risk mitigation at the next workgroup meeting on 1-16-08 was communicated

Website Update

The website will be launched with the next two weeks under the Department of Human Services Website. The site will include committee member names, contact information, reports and documents, links and meeting minutes.

Workgroup Meeting Dates:

Quality-1/16/08

NF Transitions-1/22/08 and 1/23/08

Goals and Benchmarks-1/17/08

Housing-Early March 2008

ICF/MR Transitions-No specific time

• Large Stakeholder Committee Meeting Dates (Bismarck)

02/19/08 1 pm to 4 pm

It was agreed that the Stakeholder Committee members would be provided with each section of the Operational Protocol as it is finalized by its workgroup. The Committee members will review each section and offer any comments related to its content to the MFP Grant Manager before or at the meeting with the goal of finalizing the protocol to the extent possible at the Stakeholder Committee Meeting on 2-19-08.

• Submit Operational Protocol by 2-29-2008